U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

. File Number U - 8916	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name ROBERT L PAPIN	Name PLUMBERS AND PIPEFITTERS LOCAL 30		
•	Labor Organization File Number 0//399		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any PO BOX 30616		
Street 2039 AVE. B	Street		
City BIT.T.TNGS	City		
	City BILLINGS		
State Montana ZIP Code + 4 59102	State Montana ZIP Code + 4 59107		
Position in labor organization. BUSINESS MANAGER			
. Held an interest in, engaged in transactions (including loans) onetary value <b>from an employer whose employees your org</b>	ganization represents or is actively seeking to represent.		
Held an interest in, engaged in transactions (including loans) onetary value from an employer whose employees your organized Name and address of Employer (including trade name, if any).	with, or derived income or other economic benefit of		
. Held an interest in, engaged in transactions (including loans) one tary value from an employer whose employees your orgon. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:	with, or derived income or other economic benefit of ganization represents or is actively seeking to represent.		
Held an interest in, engaged in transactions (including loans) nonetary value from an employer whose employees your org.  . Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	with, or derived income or other economic benefit of ganization represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.		
A. Held an interest in, engaged in transactions (including loans) on one tary value from an employer whose employees your orgon.  Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	with, or derived income or other economic benefit of ganization represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.		
A. Held an interest in, engaged in transactions (including loans) on nonetary value from an employer whose employees your orgon.  Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	with, or derived income or other economic benefit of ganization represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.		
A. Held an interest in, engaged in transactions (including loans) in one tary value from an employer whose employees your orgon.  Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City	with, or derived income or other economic benefit of ganization represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.		
A. Held an interest in, engaged in transactions (including loans) monetary value from an employer whose employees your org.  Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4  15. Signature and verification. The undersigned declares, under possibilitied in this report (including the information contained in any ac undersigned's knowledge and belief, true, correct, and complete. (Se	with, or derived income or other economic benefit of ganization represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.  Signature  Denalty of Perjury and other applicable penalties of the law, that all of the information companying documents), has been examined by the signatory and is, to the best of the ethe section on penalties in the instructions.)		
A. Held an interest in, engaged in transactions (including loans) monetary value from an employer whose employees your org.  Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4  15. Signature and verification. The undersigned declares, under possibilitied in this report (including the information contained in any accundersigned's knowledge and belief, true, correct, and complete. (See	with, or derived income or other economic benefit of ganization represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.  Signature  Penalty of Perjury and other applicable penalties of the law, that all of the information accompanying documents), has been examined by the signatory and is, to the best of the		

Name of Person Filling ROBERT PAPIN		The Number O-			
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active.  (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.  8. Name and address of Business (including trade name, if any).	vise dealing with the business rely seeking to represent, or irectly to, or otherwise	5			
Name PIPE TRADES TRUST	horound				
	a. Labor Organization				
Trade Name, if any:	X b. Trust				
P.O. Box, Bldg., Room No., if any PO BOX 1889	c. Employer				
Street					
City GREAT FALLS					
Sing profits the second contraction of the s					
State Montana ZIP Code + 4 59403					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
10. II 9.b. of 9.c. is checked give trust or employer's name.	TRUSTEE'S MEETING HELD IN GREAT FALLS MONTANA				
Name PIPE TRADES TRUST	MARCH, MAY AND SEPTEMBER 2004				
	- Ordinaria de la composition della composition		Androne		
Trade Name, if any:	ROOMS AND		VIII		
P.O. Box, Bldg., Room No., if any PO BOX 1889					
Street	grave an incommentation of the forest				
Ch. IDEAN PALLO	11.b. Approximate dollar value of such dealing.				
City GREAT FALLS	12.a. Nature of interest held or income received.  REIMBURSEMENT OF EXPENSES INCURRED FOR FOOD, TRAVEL AND LODGING				
State Montana ZIP Code + 4 59403					
			The Control of the Co		
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	12.b. Amount.		\$689		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.				
(including trade name, if any).					
Name	7000		**************************************		
1 VOLUME	-constitution				
Trade Name, if any:			омиронноски		
DO Boy Bldg Boom No. 15	***************************************		- A vocatella believe		
P.O. Box, Bldg., Room No., if any	an recognition and the second second		спинира васеления		
Street	Strategie de la constanta de l		занилитемът		
City			noistinaneerroor		
	2000-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		полеочитальне		
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.				